

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

UNITED STATES DISTRICT COURT
103 ~~324~~ Potter Stewart Courthouse
100 East Fifth Street
Cincinnati, OH 45202

C-01-556



■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
■ Print your name and address on the reverse so that we can return the card to you.
■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Shawn Heard
#043-026
Oh. Reformatory
for Women
1479 Collins Ave
Marysville Oh 43040

2. Article Number
(Transfer from service label) **7001 2510 0008 6348 7875**

PS Form 3811 August 2001 Domestic Return Receipt

A. Signature *[Signature]* ☒ Agent ☐ Addressee
X
B. Received by (Printed Name) *Andrews* C. Date of Delivery *7/24/04*
D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes